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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/839,847			ling Date 20/2001	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛				HER THAN	
	FOR	N	UMBER FI	.ED N	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (f),	or (m))	N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A]	N/A			N/A		
	FAL CLAIMS CFR 1.16(i))		minus 20 =		•		x s =		OR	x \$ =		
	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 = *]	x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	ts of pap 50 (\$125 tional 50	ngs exceed 100 ion size fee due v) for each on thereof. See 7 CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))												
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL		
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY												
AMENDMENT	12/04/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	- 28	Minus	30	= 0]	X \$25 =	0	OR	x s =		
	Independent (37 CFR 1,16(h))	٠4	Minus	4	= 0]	X \$105 =	0	OR	x \$ =		
ME	Application Size Fee (37 CFR 1.16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)												
L		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Ä	Total (37 CFR 1,16(i))	*	Minus	**	=]	x s =		OR	x s =		
AMENDMENT	Independent (37 CFR 1.16(h))	•	Minus	***	-]	x \$ =		OR	x \$ =		
Ш	Application Size Fee (37 CFR 1.16(s))]			1			
ΑŅ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						TOTAL		OR			
+ 12	* If the entry in column 1 is less than the entry in column 2, write *0" in column 3.								OR .	TOTAL ADD'L FEE		
** If	If the entiry in column 1 is less than the entry in column 2, write 0" in column 3. Legal Instrument Examiner: if the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". ANGELA WHITE THE "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IR THIS SPACE is less than 5, enter "3".											

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